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Trans-generational transmission of traumatic memory and moral injury

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Abstract

The scale of casualties in World War I and the reinterpretation of the conflict in terms of futility and waste suggest that many veterans experienced moral injury. Memory of the war was in part determined by their experience of the peace. Governments sought to contain traumatic memory through commemorative rituals such as Armistice Day and homage to the Unknown Soldier, whilst relatives were not permitted to repatriate the dead from military cemeteries on the battlefields. Despite gains in treating psychiatric casualties, many veterans with shell shock never recovered from their psychological wounds. To what extent their symptoms were a consequence of moral injury is not known, though individual accounts suggest that shame and guilt were features of their enduring illness.

Keywords: trans-generational trauma, memory of war, psychiatric casualties, shell shock, memorials, veterans, moral injury

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During World War I, families who had lost a son or father on the battlefield observed the tradition of wearing dark mourning attire. Yet in 1917 commentators in France and the UK reported that people increasingly failed to mark the death of relatives in this way (Audoin-Rouzeau & Becker, 2002). Either the bereaved were too numerous to have special value or civilians had become weary of continual reminders of mortality. The effect was long lasting and in the post-war period the tradition of mourning dress fell into progressive decline. The scale of casualties and the post-war reinterpretation of the conflict in terms of futility and waste suggest that many veterans experienced what today would be described as moral injury. Although the term was not used at the time, letters and diaries written during or immediately after the conflict reveal soldiers struggling to reconcile the demands made of them by the armed forces with deeply rooted beliefs about the value of life and the nature of a just conflict. How veterans remembered the war was, in part, determined by their experience of the peace. Governments sought to manage the effects of traumatic memory through commemorative acts such as Armistice Day, homage to the Unknown Soldier, the provision of war pensions and treatment programmes. As a result, transmission took place in a variety of modalities: private and public dialogue, literature and movies, memorials and state-sanctioned rituals together with the direction of federal funding. Taking World War I as an example, this paper will explore the expression of traumatic memory and its relationship to moral injury.

Psychological trauma

World War I taught the principal combatant nations about psychological casualties. In an extended conflict of attrition, they were numerous and of too great a military consequence to be ignored. By 1918, the larger European armies had extended systems of management in place: forward units to treat breakdown on the battlefield, networks of specialist hospitals in rear areas for chronic or severe cases and rehabilitation programmes for those no longer able to perform a role in the armed forces (Jones & Wessely, 2014). Civilians also began to learn about shell shock as relatives visited soldiers in hospital and observed its longer-term effects in the ex-service population. The scale of casualties required state intervention. In December 1916 the Ministry of Pensions was created to provide welfare systems for veterans and families alike. Whilst the priority during the war was the efficient return of traumatized soldiers to active duty, the signing of the Armistice brought a new agenda: how to contain trauma and facilitate the transition to peacetime life. Frederick Mott, who had run the

Maudsley Neurological Clearing Hospital during the war, believed that the best way to resolve the force of traumatic memory was not psychoanalytical catharsis but active engagement in healthy activities to facilitate a natural dissipation. “Diversion of the mind,” he wrote, “should be encouraged to avoid introspection and dwelling upon the terrible experiences they [soldier patients] have gone through” (Mott, 1919, p. 270). Although work and social activities were considered therapeutic (Cohen, 2001), it was also recognised that some veterans had been so traumatized by their military service as to require specialist treatment. The Ministry of Pensions set up a national network of “Special Medical Clinics” to treat shell shock by out-patient psychotherapy. Case notes suggest that doctors encouraged veterans to report war dreams in the belief that the act of retelling would discharge the energy attached to the traumatic experience without the need for interpretation (Eshelby, 1924).

Moral injury during World War I

There is as yet no agreed definition of moral injury and this paper is based on a broad interpretation of term. Moral wounds of war are said to arise when a veteran feels that he or she has perpetrated, failed to prevent, borne witness to or learned about acts “that transgress deeply held moral beliefs and expectations” (Litz et al., 2009). Repeated thoughts about wartime acts of commission (particularly killing) or omission (failing to prevent atrocities) have prompted the description of a syndrome, characterised by guilt and shame (Frankfurt & Frazier, 2016). “Transgressions”, as Sherman has observed, “may be real or apparent, and in either case, can cause deep and real moral suffering” (Sherman, 2015, p. 174).

Letters and diaries written by front-line soldiers during World War I reveal that some combatants experienced moral injury, largely because they found it increasingly difficult to justify the killing required of infantry soldiers. In July 1917, Lieutenant Siegfried Sassoon of the Royal Welch Fusiliers sent a letter to his commanding officer, copied to politicians and literary figures, to register his opposition to the continued conduct of the war. He believed that “a war of defense and liberation” had become one of “aggression and conquest” fought for “evil and unjust” ends (1937, p. 496). Before this change of heart, Sassoon had earned a reputation for aggressive courage, conducting nightly patrols into no man’s land to attack German working parties with bombs and a revolver. At the Somme, he single-handedly assaulted a German trench, writing “I definitely wanted to kill someone at close quarters” (Egremont, 2005, p. 104). His exploits earned him a Military Cross and the nickname “Mad Jack”. Following a period of home leave, he increasingly believed that the killing was

unjustified and wrote that “prolonged campaigning... deadens all the fine and sensitive instincts of men” (Egremont, 2005, p. 123). The death of many comrades at the battle of Arras in April 1917 and his own wounding led to Sassoon suffer a form of breakdown that included an element of moral injury and he was referred to a specialist psychiatric unit at Craiglockhart. There his treatment by W.H.R. Rivers included discussion of war aims, the policies of European politicians and the dilemma they presented to an officer expected to return to the front (Sassoon, 1937, p. 521).

Max Plowman, an officer in the Yorkshire Regiment, had also taken part in front-line combat and witnessed killing at close hand (Plowman, 1927). At the outbreak of war, socialist beliefs had led Plowman to volunteer as a non-combatant with the Royal Army Medical Corps but a belief in a collective national responsibility for the conduct of the war led him to transfer to the infantry (Atkin, 2002, p. 109). Plowman fought at the Somme where in January 1917 he was concussed and invalided home with shell shock. Hospitalization gave him an opportunity to reflect on the war and its effects. His experience of artillery bombardments led him to conclude that they were not only futile but also a form of institutionalized murder (Plowman, 1927, p. 51). Plowman no longer felt able to participate in state-sanctioned killing and asked to be relieved of his commission. He was arrested and tried by court martial in April 1918 for refusing to return to his unit. In the post-war period, Plowman achieved a measure of reconciliation by campaigning for a pacifist agenda, serving as the general-secretary of the Peace Pledge Union.

Another infantry officer, Arthur Graeme West was so troubled by his experience of combat that he too sought to resign his commission and leave the army but was killed by a sniper in April 1917 before his resignation letter had been made public. Leave in the UK had given him the opportunity to re-evaluate his war service and led to “a violent revulsion of my old imagined glories and delights of the army” (West, 1919, p. 50). Combat, he argued, was “bestly and degrading” and could only be justified as “the gratification of senseless rivalry”. Having written the letter but not posted it, West returned to the front in a troubled state of mind: “I ought to fight no more...I am *almost* certain that I do wrong to go on” (West, 1919, pp. 54-55). Conflicted by comradeship and a sense of national duty, West was unable to resolve the moral injury that he had felt once removed from war zone.

Despite the emerging victorious from World War I, many British veterans felt an enduring sense of unease and struggled to reintegrate themselves into civilian life. J.B. Priestley, who had served in the 10th Duke of Wellington's Regiment, recalled a regimental reunion held in autumn 1933: "never have I seen a tavern stairs or a tavern upstairs so crowded, so tremendously alive with roaring masculinity... It is the peace that is wrong, the civilian life to which they [his comrades] returned, a condition of things in which they found their manhood stunted, their generous impulses baffled" (Priestley, 1934, pp. 162-63). Priestley had not objected to the conduct of the war but believed that the costs outweighed the gains: the trauma of military service had not been rewarded by educational opportunities and diversity of employment for most veterans. By contrast, he had been eligible for an ex-officer's grant which allowed him to study at Trinity Hall, Cambridge, and launch a new career as a novelist and playwright.

Initially, the Ministry of Pensions had been confident that it could successfully treat veterans with shell shock. Not only did it set up a network of out-patient clinics, the Ministry also opened ten specialist hospitals and by 1921 was treating 10,000 war pensioners (Jones & Wessely, 2005, p. 155). However, therapeutic targets were not met and in 1926 the Ministry concluded from patient surveys that ex-servicemen with chronic psychological disorders were unlikely to be cured. Of the 65,000 war pensions for shell shock in 1921, 30,220 remained in payment in 1936 (Prideaux, 1936, Appendix 3). It remains a moot question to what extent moral wounds, and in particular feelings of shame and guilt, served to maintain or intensify shell shock and other psychological disorders experienced by veterans during the interwar period.

Containing traumatic memory

How veterans remembered World War I and contextualized the sacrifice was, in part, determined by their experience of the peace. In the immediate aftermath, Allied governments not only celebrated victory but also sought to commemorate the dead. In the UK, villages and towns raised funds to construct war memorials, which served as a focus of mourning during the annual Armistice Sunday service when a two-minute silence was observed (Winter, 1995). The ritual was so designed that a pacifist and a warrior could stand together, each entertaining their different thoughts in an apparent show of unity. The Cenotaph, the symbolic focus of grieving in the UK, was originally a temporary structure of timber and plaster designed for a victory parade in July 1919 but after its removal the outcry was so great

that a permanent copy in Portland stone was commissioned. A poppy emblem, a symbolic link with the battlefields, sold by the British Legion to raise funds for veterans proved an important marketing device; 27 million poppies being manufactured in 1924. Although commemoration in itself did not bring psychological resolution for grieving parents, it was sponsored by governments to bring a form of cultural closure.

Veterans were encouraged to attend the annual Armistice service and to wear their campaign medals to identify their military service. In the mid-1920s, Robert Graves observed that some ex-servicemen wore their medals under their coats to indicate comradeship with the dead, rather than support for the war itself (Graves, 1929, p. 260). In the UK, one in six families lost a close relative so most who observed Armistice rituals did so from a sense of solidarity and support for those who had suffered directly (Gregory, 2008). Nevertheless, the number of bereaved was substantial: 240,000 war widows and 350,000 children who had lost a father in the UK, whilst in France the totals were higher, 600,000 and 760,000 respectively (Audoin-Rouzeau & Becker, 2002, p. 210).

Historically, the British had buried their dead in military cemeteries on the battlefield or in the case of the Royal Navy at sea. In 1914-15, as casualties mounted, families sought to bring the bodies of sons and fathers home to bury them in ways of their own choosing. Conscious of the cost of repatriation and its potential impact on public opinion, the UK government intervened to give a geographical focus to trauma. From mid-1915 onwards, the War Office refused families permission to repatriate their dead on the grounds of equality, arguing that only the wealthy could afford the costs. Indeed, one of the few bodies brought home was that of Lieutenant William Gladstone, grandson of the prime minister, who had been killed in April 1915 and was buried in a family grave at Hawarden, North Wales.

After the war, when permanent cemeteries were laid out, the Imperial War Graves Commission imposed a standard design of military headstone, denying the wishes of relatives to choose a site and type of grave marker. This policy contrasted with that for soldiers who died of wounds in UK hospitals. Families retained their burial rights and could choose how and where the dead were commemorated. The decision to curtail the rights of relatives was softened by creating graveyards that drew on British architectural and garden traditions (Ware, 1937). By contrast, the Trench of Bayonets memorial, opened in December 1920 to commemorate French dead at Verdun, was a minimalist structure of reinforced concrete in

modernist style. Its architect, André Ventre, sought to represent “tragedy and heroism” in a structure stripped of ornament to convey a sense of timelessness (Winter, 1995, p. 101). From the outset the British imposed an element of standardization and control. Although young architects who had served in the war were commissioned to plan military cemeteries, they were supervised by four principal architects (Edward Lutyens, Reginald Blomfield, Herbert Baker and Charles Holden) within an overall code of design (Ware, 1937).

Names of British men whose bodies had been annihilated or not found, the so-called “missing”, were recorded on memorials constructed at Thiepval on the Somme and at Ypres (the Menin Gate, Tyne Cot and the Berkshire Cemetery). For relatives who had no tangible focus for mourning or who could not afford to travel to Europe, the government offered a different form of resolution. In November 1920, the body of an unknown British soldier was taken from a grave in France and interred in Westminster Abbey (Hunt, 2010). At the same time, an unidentified French corpse was taken from Verdun to Paris where it was carried on a gun carriage to the Pantheon accompanied by a war widow, parents who had lost a son and a child who had lost a father. The body was then buried at the base of the Arc de Triomphe as a permanent memorial. Such was the popular appeal of the ritual that it was adopted in Washington, Rome and Brussels in 1921. Although introduced to commemorate soldiers with no known grave, these memorials also offered symbolic repatriation for those families whose relatives had been compulsorily buried in distant military cemeteries.

Whilst the British successfully resisted campaigns for the repatriation of the war dead, French and American governments yielded to popular pressure, though for different reasons. In November 1918, the French had prohibited the exhumation of the war dead for three years, arguing that it would inhibit vital reconstruction work and the construction of official military cemeteries. A public campaign waged as grieving relatives sought to recover their sons and husbands from temporary battlefield graves (Winter, 1995). In September 1920, the French government agreed to fund the cost of exhumation and transport, though the process was delayed until summer 1922 when, of the 700,000 identified corpses, 240,000 were removed from battlefield cemeteries. Of the major combatants, France had suffered the highest mortality (3.4% of the total population compared with 1.6% for the UK), greatest physical destruction, and plausibly experienced the greatest moral injury.

During the conflict, American families had been promised the option of repatriation but in the aftermath General John J. Pershing and Theodore Roosevelt argued that US dead should remain in France to mark the scale of the nation's contribution. Determined lobbying by families, many of whom could not afford to travel to Europe, ensured that choice was honored, though repatriation was delayed until 1921. Eventually, 70 per cent of those servicemen who had died overseas were returned to the US for burial with over 30,000 remaining in military cemeteries overseas (Budreau, 2008, pp. 372, 378). A similar policy operated in World War II with 171,000 of the 280,000 identified remains being exhumed and transported to America. In March 1929, Congress enacted legislation to fund officially organized pilgrimages for mothers and widows to Europe, so that they could visit the graves of their sons or husbands buried in military cemeteries. Of the 30,000 people contacted, just over 6,000 made the journey between 1930 and October 1933 at a cost of over \$5 million. The Gold Star Association had argued that the strength of the bond between a mother and her son justified federal aid, though Congress widened eligibility to widows.

Transformation of traumatic memory

The 1920s saw veterans and their families struggle to come to terms with the experience of war, whilst writers, poets and film-makers began to address the issue of traumatic memory. The publication in 1929 of Erich Remarque's best-selling novel, *All Quiet on the Western Front*, appeared to encapsulate the prevailing mood. However, the legitimacy of this narrative was questioned by other veterans. Although conscripted into an infantry regiment, Remarque had served only briefly in the trenches. Charles Carrington, an infantry officer, wrote "the back-area accounts of soldiers at the base were true to life and sometimes powerfully depicted, but the nearer the characters came to the front the more did critical readers doubt whether the author had ever been there" (Carrington, 1965, p. 264). Carrington believed that the increasing popularity of literature that cast World War I in terms of waste and futility was related to the distress caused by the global economic depression. Civilians and veterans facing unemployment and loss of savings and homes attributed their plight to the long-term effects of the conflict. Observing this mutation of traumatic memory, John Hay Beith, a decorated infantry officer who wrote under the pseudonym of Ian Hay, observed "war has become a monstrous, unspeakable thing" and cautioned that "our reactions and emotions... are too fluid to have any lasting value. We must leave it to time to crystalize them" (Hay, 1931, pp. 2, 152).

The impact of the 1929 economic depression may be viewed in two ways. Either it weakened the argument that the colossal casualties of World War I were justified by the conditions of the subsequent peace, or it gave licence to veterans who had suffered moral injury but felt unable to express their beliefs until the euphoria of victory has passed.

Traumatic memory in the context of subsequent conflicts

The reinterpretation of World War I as a futile waste of lives did not prevent young men from joining British armed forces in the late 1930s. The Royal Navy and the Royal Air Force had no difficulty finding recruits and, though the British Army often struggled to fill the ranks of the infantry, this was as much about pay and conditions as memories of the trenches. By September 1939, when war was declared, the British Army numbered 892,700 of whom only 34,500 were conscripted Militiamen, whilst 438,100 were Territorials, all of whom had volunteered (French, 2000, pp. 63-64). Indeed, the anti-war poet Robert Graves attempted to re-enlist in 1939, whilst two daughters from his first marriage joined the Women's Auxiliary Air Force and his son, David, served with distinction in the infantry.

Although the British volunteered in their thousands on the outbreak of World War II, it was not with the sense of adventure and enthusiasm witnessed in 1914 (Calder, 1969). Widespread knowledge of the reality of combat led to a resigned acceptance but no mass anti-war protests. In November 1939 the government cancelled the public commemoration of Armistice Day (Gregory, 1994). Sirens, now employed to warn of an air-raid, could no longer be used to mark the two-minute silence and the assembly of large crowds was discouraged. The suspension of Armistice Day ritual was also a symbolic gesture. The dominant emotional model for a nation again at war was "stiff upper lip" and the space for the expression of moral injury was restricted.

Because of its scale, World War I created a formal model of grieving and commemoration that was adopted in subsequent conflicts. The names of those killed or missing in World War II were added to the existing memorials and Armistice Day, though tied to November 11, was reformulated to include the dead of subsequent conflicts. No new unknown soldier was interred, while UK servicemen killed in action continued to be buried in standardized battlefield cemeteries until the Falklands War of 1981. In the aftermath of the conflict, the families of 16 servicemen chose to have their sons buried on the island, whilst 64

bodies were brought home, the result of a campaign by relatives to be granted the option of repatriation.

Conclusion

Traumatic memory is transmitted from one generation to the next in a variety of ways including literature (memoirs, novels and poems), film, memorials and commemorative rituals, as well as formal teaching in schools. Nations need time after wars to mourn their dead and evaluate whether the costs were proportionate to the initial threat and outcome. These are both political and emotional issues. Hence, traumatic memory is not simply about the feelings of veterans and their close families. Society as a whole takes a view. In the 1930s, most Britons who bought a poppy, stood in silence on Armistice Day or voted for policy of appeasement had not lost a close relative in World War I, though they would certainly have known someone who had been killed or wounded. Traumatic memory responds to cultural undercurrents and is shaped by events. Moral wounds of war arise should a veteran feel that the conflict itself was unjustified or that its conduct violated deeply-held beliefs about just behavior. Cultural evidence in the form of novels, memoirs, poems and film suggested that a growing number of veterans experienced moral wounds as the costs were counted and the global economy faltered. Memorials and rituals designed to contain traumatic memory could not address the ethical dilemmas faced by ex-service personnel and may even have accentuated them by serving as enduring reminders of loss. World War II was associated with a different narrative: a justification founded on a need to defeat fascist states engaged in racist persecution. Traditional commemorative rituals were supplemented by welfare programmes organized in part to offset the physical and emotional demands of the conflict. The psychological casualties of Afghanistan and Iraq will evolve not only in response to the development of treatments but also to the way in which these conflicts are perceived to have impacted on international politics.

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